## BEST AVAILABLE COPY

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

**CLAIMS AS FILED - PART I** 

Application or Docket Number

1100 - 02/01

		CLAIMS AS		LED - PART I Column 1) (Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			62		Part of the second		RATE	FEE	7	RATE	FEE
FOR		NUMBER FILED		NUMBER EXTRA		BASIC F		OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			6 2 minus 20=		. 42		X\$ 9=		OR	X\$18=	756
INDEPENDENT CLAIMS			✓ minus 3 =		1		X40=		OR	X80=	80
MU	ILTIPLE DEPEN	IDENT CLAIM P	RESENT				+135=	:	OR	+270=	1
* If	the difference	in column 1 is	less than ze	ess than zero, enter "0" in c			TOTAL	-	OR	TOTAL	1546
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)							SMAL	L ENTITY	OR	OTHER SMALL	
AMENDMENT A	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus ***		CLAIM	=	X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
							TOTA		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	ADDIT. FE	L -		ADDII, FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	NTATION OF MU	Minus	***	CLAIM	=	X40=		OR	X80=	
<u> </u>	FINOT FRESE	INTATION OF MIC	JETIPLE DEF	ENDEN	CLAIM		+135=		OR	+270=	
								L E	OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur	nn 2)	(Column 3)					
AMENDMENT C	ary a Made a County	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	-	=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	X40=		OR	X80=	
<u> </u>	LINOI PHESE	NTATION OF MI	JLTIPLE DEF	ENDEN	CLAIM		+135=	1	OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											